

RECEIVED
CENTRAL FAX CENTER

NOV 07 2005

FENWICK & WEST LLP

Silicon Valley Center • 801 California Street • Mountain View, CA 94041
Tel 650.988.8500 • Fax 650.938.5200 • www.fenwick.com

FACSIMILE TRANSMISSION

E 2 30

CONFIDENTIAL

DATE: November 7, 2005

CLIENT-MATTER No.: 23029-05797

To:

NAME	FAX No.	PHONE No.
USPTO	571-273-8300	

FROM: Sabra-Anne R. Truesdale PHONE: (650) 335-7187

SENT BY: Dana Chevalier PHONE: (650) 943-5363

NUMBER OF PAGES WITH COVER PAGE: 19	ORIGINAL WILL NOT FOLLOW
-------------------------------------	--------------------------

MESSAGE:

Please see attached.

CAUTION - CONFIDENTIAL

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE OR THEIR DESIGNEE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

IF YOU DO NOT RECEIVE ALL OF THE PAGES, OR IF THEY ARE NOT CLEAR,
PLEASE CALL DANA CHEVALIER AT (650) 943-5363 AS SOON AS POSSIBLE.

A1000/00103/DOCS/1403268.1

RECEIVED
CENTRAL FAX CENTER

NOV 07 2005

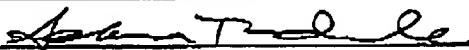
+

TRANSMITTAL FORM <i>(to be used for all correspondence during pendency of filed application)</i>	Application Number	09/825,604	
	Filing Date	April 3, 2001	
	First Named Inventor	Anthony Aquila	
	Group Art Unit Number	3626	
	Examiner Name	Christopher L. Gilligan	
Total Number of Pages in This Submission	18	Attorney Docket Number	23029-05797 (22606-05797)

ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) []
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References	<input type="checkbox"/>
<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/>
<input type="checkbox"/> Request for Correction of Recorded Assignment	<input type="checkbox"/>
<input checked="" type="checkbox"/> Amendment/Response to Restriction Requirement: 17 Page(s) <input type="checkbox"/> After Final	<input type="checkbox"/>
<input type="checkbox"/> Status Request	<input type="checkbox"/>
<input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/>

REMARKS:

SIGNATURE OF ATTORNEY OR AGENT		
Signature:		
Attorney/Reg. No.:	Sabra-Anne R. Truesdale, Reg. No. 55,687	Dated: 11-7-05

CERTIFICATE OF FACSIMILE TRANSMISSION		
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.		
Signature:		
Typed or Printed Name:	Sabra-Anne R. Truesdale	Dated: 11-7-05
Facsimile Number:	571-273-8300	

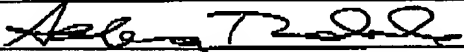
23029/05797/DOCS/1573222.1

RECEIVED
CENTRAL FAX CENTER

NOV 07 2005

IN THE
UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Anthony Aquila, et al.
APPLICATION SERIAL NO.: 09/825,604
FILING DATE: April 3, 2001
TITLE: System and Method of Administering, Tracking
and Managing of Claims Processing
EXAMINER: Christopher L. Gilligan
GROUP ART UNIT: 3626
ATTY. DKT. NO.: 23029-05797 (22606-05797)

CERTIFICATE OF FACSIMILE TRANSMISSION		
I hereby certify that this correspondence is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.		
Signature:		
Typed or Printed Name:	Sabra-Anne R. Truesdale, Reg. No. 55,687	Dated: 11-7-05
Facsimile Number:	571-273-8300	

MAIL STOP AMENDMENT
COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

AMENDMENT AND RESPONSE TO RESTRICTION REQUIREMENT

Sir:

In response to the office action mailed October 7, 2005, please amend the above-referenced application as indicated herein.